O 1 P E MAY 2 5 2004

Docket No. C-477

## Declaration and Power of Attorney For Patent Application

## **English Language Declaration**

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name,				
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled WATER WASHABLE LITHOGRAPHIC PRINTING INKS HAVING LOW VOC CONTENT				
the specification of which				
(check one)				
☐ is attached hereto.  ☑ was filed onDecember 31, 2003  Application Number10/751,164  and was amended on	as United States Application No	o. or PCT International		
	(if applicable)			
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.				
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.				
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, or plant breeder's rights certificate(s), or 365(a) of any PCT International application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.				
Prior Foreign Application(s)		Priority Not Claimed		
(A)	/D = - /B A = - A   D / = - C   P / = - 1			
(Number) (Country)	(Day/Month/Year Filed)			
(Number) (Country)	(Day/Month/Year Filed)			
(Number) (Country)	(Day/Month/Year Filed)			

I hereby claim the benefit under application(s) listed below:	r 35 U.S.C. Section 119(e)	) of any United States provisional
(Application Serial No.)	(Filing Date)	
(Application Serial No.)	(Filing Date)	
(Application Serial No.)	(Filing Date)	
Section 365(c) of any PCT Internationsofar as the subject matter of earlined States or PCT International U.S.C. Section 112, I acknowledge Office all information known to me	ional application designating ach of the claims of this application in the manner per the duty to disclose to the less to be material to patentable between the filing date of	any United States application(s), or the United States, listed below and, olication is not disclosed in the prior provided by the first paragraph of 35 United States Patent and Trademark ility as defined in Title 37, C. F. R., the prior application and the national
(Application Serial No.)	(Filing Date)	(Status) (patented, pending, abandoned)
(Application Serial No.)	(Filing Date)	(Status) (patented, pending, abandoned)
(Application Serial No.)	(Filing Date)	(Status) (patented, pending, abandoned)

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. (list name and registration number)

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Citizenship	
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Sixth inventor's signature	Date
Residence	
Citizenship	
Post Office Address	